Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	PENNSYLVANIA			
Case number	21-02550					
(if known)	21 02000			☐ Check if this is an amended filing		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	251,900.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,495.66
	1c. Copy line 63, Total of all property on Schedule A/B	\$	276,395.66
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	206,009.88
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	38,605.00
	Your total liabilities	\$	244,614.88
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,389.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,408.32
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal	, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____8,333.34

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	V o	nnoth E N	licahan ID					
Debioi i		Name	lischan, JR Midd	dle Name	Last Name			
Debtor 2								
Spouse, if	filing) First	Name	Midd	dle Name	Last Name			
Jnited S	tates Bankrupto	cy Court for	the: MIDDLE [DISTRICT OF PE	ENNSYLVANIA			
Case nu	mber <u>21-025</u>	550						☐ Check if this is a amended filing
Offici	al Form 1	106A/B	.					
	edule A	_	_					12/15
□ No.	Go to Part 2.							
	. Where is the pro	operty?		What is the p	oroperty? Check all that apply			
l.1 _ 11 ()r	cription	_ Single-	oroperty? Check all that apply -family home k or multi-unit building ominium or cooperative	the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
.1 _ 11(Where is the pro)r	cription	Single- Dupley Condo	-family home k or multi-unit building	the amount Creditors V	of any secure Vho Have Clair	d claims on Schedule D: ns Secured by Property.
.1 110 Stree	Where is the pro)r	cription	Single- Dupley Condo	-family home or multi-unit building ominium or cooperative	the amount Creditors V Current va entire prop	of any secure Who Have Clair lue of the perty?	d claims on Schedule D:
.1 110 Stree	Where is the pro Dairyland D et address, if available)r le, or other des		Single- Dupley Condo Manufa Land Investr Timesl Other Who has an i	-family home or multi-unit building ominium or cooperative actured or mobile home ment property hare interest in the property? Check on	Current va entire prop \$25 Describe to (such as fet)	of any secure. Who Have Clair lue of the perty? 51,900.00 he nature of y	d claims on Schedule D: ms Secured by Property. Current value of the
.1 110 Street	Dairyland Det address, if available	Pr le, or other desi PA	17313	Single Dupley Condo Manufa Land Investr Timesl Other Who has an i Debtor	-family home or or multi-unit building sminium or cooperative actured or mobile home ment property hare interest in the property? Check on r 1 only	Current va entire prop \$25 Describe ti (such as fe a life estate	lue of the perty? 51,900.00 the nature of yes simple, tene), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$251,900.0 our ownership interest
.1 110 Street	Dairyland Det address, if available	Pr le, or other desi PA	17313	Single- Dupley Condo Manufa Land Investr Timesl Other Who has an i Debtor Debtor At lease Other inform	r-family home or or multi-unit building cominium or cooperative actured or mobile home ment property hare interest in the property? Check on r 1 only r 2 only r 1 and Debtor 2 only	Current va entire prop \$25 Describe ti (such as fe a life estate)	of any secure. Who Have Clair lue of the perty? 51,900.00 the nature of yee simple, tene), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$251,900.00 our ownership interest ancy by the entireties, o
.1 110 Street	Dairyland Det address, if available	Pr le, or other desi PA	17313	Single- Dupley Condo Manufa Land Investr Timesl Other Who has an i Debtor Debtor At leas Other inform property ider	-family home or multi-unit building comminium or cooperative cactured or mobile home ment property hare interest in the property? Check on r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another ation you wish to add about this	Current va entire prop \$25 Describe ti (such as fe a life estate) Check (see institute, such as lo	of any secure. Who Have Clair lue of the perty? 51,900.00 the nature of yee simple, tene), if known. if this is compared to the compared to t	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$251,900.00 our ownership interest ancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debte	or 1 K	enneth E Ni	schan, JR		Case number (if known)	21-02550
3 Ca	rs. vans.	trucks, tracto	ors, sport utility ve	hicles, motorcycles		
). U u	io, valio,	tradito, tradit	or of opera armity re-	o.oo,o.o, oyo.oo		
	No					
•	Yes					
3.1	Make:	Hyundai		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Veloster		■ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2013		Debtor 2 only		
		nate mileage:	95000	Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
		ormation:		☐ At least one of the debtors and another	,	. ,
	Vehicle					
				☐ Check if this is community property (see instructions)	\$6,500	.00 \$6,500.00
					Do not doduct opp	ured eleime or examptions. Dut
3.2	Make:	Dodge		Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Grand Car	ravan	Debtor 1 only		ve Claims Secured by Property.
	Year:	2007		Debtor 2 only	Current value of t	he Current value of the
	Approxim	nate mileage:	125000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:		At least one of the debtors and another		
	Vehicle) :		☐ Check if this is community property (see instructions)	\$1,500	.00 \$1,500.00
	Yes					
				n for all of your entries from Part 2, includin that number here		\$8,000.00
Part 3	Doscril	no Vour Borson	al and Household Ite	nme	-	
				terest in any of the following items?		Current value of the
						portion you own? Do not deduct secured claims or exemptions.
E		goods and fu Major appliand		, china, kitchenware		
	Yes. De	scribe				
		[Household furn	iture; pots/pants/dishes; living room su	uite: dinina	
				urniture, bedroom suite, master bedroo		
			lights, china, sil	verware, small appliances; large applia	nces	\$7,500.0
7. Ele	ectronics					
			d radios; audio, vide	eo, stereo, and digital equipment; computers, pr	inters, scanners; music co	ollections; electronic devices
_		including cell p	ohones, cameras, m	nedia players, games		
	No					
	Yes. De	scribe				

Official Form 106A/B Schedule A/B: Property page 2

1000	
Circotech media server	
1800	
Projector	
1200	
Main workstation PC	
400	
Virtual reality equipment	
200	
Dell 4210 rack	
40	
HP switch	
60	
Netgear switch	
50	
HP 1U Console	
50	
P KVM switch	
200	
55" TV	
100	
42" TV	
80 Bea coop	
PS3 60GB	
50 Procurve DL380	
50	
Procurve DL380	
50	
Procurve DL380	
50	
Procurve DL380	
50	
Dell laptop 1	
80	
Dell laptop 2	
300	
HTPC	
100	
KLH tower speakers upstairs	
100	
Downstairs speakers	
50	
Onkyo receiver upstairs	
50	
Onkyo receiver downstairs	
400	
Monitors	
80	
BD player	
50	
Printer	
Koyboards/Mico/Mico 100	

\$6,740.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

■ Yes. Describe.....

Collectibles:

Official Form 106A/B

Schedule A/B: Property

\$150.00

page 3

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Best Case Bankruptcy

Debtor	Kenneth E N	lischan, JR	Case number (if known)	21-02550
	quipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf musical instruments		es, golf clubs, skis; canoes	and kayaks; carpentry tools;
Y	es. Describe			
		Sports-Hobby:		\$450.00
	camples: Pistols, rifles	s, shotguns, ammunition, and related equipment		
		Firearms:		\$0.00
	<i>camples:</i> Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories		
		Clothes:		\$1,500.00
	<i>camples:</i> Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloor	m jewelry, watches, gems, ç	old, silver
		Jewelry:		\$0.00
Ex	n-farm animals camples: Dogs, cats, No Yes. Describe	birds, horses		
		Animals:		\$0.00
	-	d household items you did not already list, including any hea	lth aids you did not list	
		of all of your entries from Part 3, including any entries for pagnumber here	ges you have attached	\$16,340.00
	Describe Your Finan			
Do you	u own or have any l	egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	<i>amples:</i> Money you l No	have in your wallet, in your home, in a safe deposit box, and on ha	and when you file your petiti	on
			Cash:	\$0.00
				ΨΟ.ΟΟ

Official Form 106A/B Schedule A/B: Property

Desc

De	ebtor 1	Kenneth E Nischan, JR	Case number (if known) 21-025	50
17.	-	s of money es: Checking, savings, or other financial accinstitutions. If you have multiple accoun	counts; certificates of deposit; shares in credit unions, brokerage houses, a ts with the same institution, list each.	nd other similar
	□ No ■ Yes		Institution name:	
		17.1.	Checking Account: Truist- Primary	\$70.77
		17.2.	Checking Account: Truist - Secondary	\$4.50
		17.3.	Checking Account: Member's 1St	\$5.52
		17.4.	Checking Account: M&T	\$10.48
		17.5.	Savings Account: Member's 1St	\$10.05
	■ No □ Yes		r name:	
19.	joint ver	nture Sive specific information about them		.C, partnership, and
20.	Negotial Non-neg ■ No	ble instruments include personal checks, ca	% of ownership: potiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
21.		ent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ Yes. Li	st each account separately. Type of account:	Institution name:	
22.	Your sha		so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies, or ot	hers
			Institution name or individual:	
23.	Annuitie	s (A contract for a periodic payment of mor	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		in an education IRA, in an account in a §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition program.	
	☐ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, e	equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable	for your benefit

Schedule A/B: Property

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Official Form 106A/B

Best Case Bankruptcy

De	ebtor 1	Kenneth E Nischan, JR	Case number (if known)	21-02550
	☐ Yes.	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and other intellectual property poles: Internet domain names, websites, proceeds from royalties and licensing ag	reements	
	_	Give specific information about them		
		Intellectual: Six Domain Names For Persona	l Sites	\$52.34
27.		ses, franchises, and other general intangibles bles: Building permits, exclusive licenses, cooperative association holdings, lique	or licenses, professional licens	es
		Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already filed the re-	turns and the tax years	
	Examp ■ No	r support ples: Past due or lump sum alimony, spousal support, child support, maintenanc Give specific information	e, divorce settlement, property	settlement
	Exam _l ■ No	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits, sick pay, benefits; unpaid loans you made to someone else Give specific information	vacation pay, workers' compe	nsation, Social Security
31.		sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); credit, ho	omeowner's, or renter's insura	nce
		Name the insurance company of each policy and list its value. Company name: Be	eneficiary:	Surrender or refund value:
		Insurance: Home Owner's Policy		\$1.00
		Insurance: Auto		\$1.00
	If you some o	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, one has died. Give specific information	or are currently entitled to rec	eive property because
33.		s against third parties, whether or not you have filed a lawsuit or made a depoles: Accidents, employment disputes, insurance claims, or rights to sue	emand for payment	
		Describe each claim		
34.	■ No	contingent and unliquidated claims of every nature, including counterclain Describe each claim	ns of the debtor and rights to	set off claims
Off		m 1064/B Schedule A/R: Property		nage f

Case 1:21-bk-02550-HWV

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Best Case Bankruptcy

Debtor 1	Kenneth E Nischan, JR		Case number (if known)	21-02550
35. Any	financial assets you did not already list			
■ No				
☐ Ye	s. Give specific information			
	d the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$155.66
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. Do yo	u own or have any legal or equitable interest in any business-relate	d property?		
No.	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You f you own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
46. Do y	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ N	o. Go to Part 7.			
ΠY	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exai ■ No	ou have other property of any kind you did not already list? mples: Season tickets, country club membership s. Give specific information			
54. Ad	d the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form		l	
55. Pa r	t 1: Total real estate, line 2			\$251,900.00
	t 2: Total vehicles, line 5	\$8,000.00		<u> </u>
	t 3: Total personal and household items, line 15	\$16,340.00		
	t 4: Total financial assets, line 36	\$155.66		
	t 5: Total business-related property, line 45	\$0.00		
	t 6: Total farm- and fishing-related property, line 52	\$0.00		
	t 7: Total other property not listed, line 54 +	\$0.00		
	al personal property. Add lines 56 through 61	\$24,495.66	Copy personal property to	otal \$24,495.66
62. Tot	ar personal propertyr rad into do amough or	ΨΞ 1, 100100	copy policinal property to	Ψ 2 +,+33.00

Official Form 106A/B Schedule A/B: Property page 7

Case 1:21-bk-02550-HWV

Fill in this infor					
Debtor 1 Kenneth E Nischan, JR					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	PENNSYLVANIA		
Case number	21-02550				
(if known)	21 02000				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Da	Int 1: Identify the Property You Claim as E	vomnt							
	, ,	•							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonban	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	110 Dairyland Dr Dallastown, PA 17313	\$251,900.00		\$25,150.00	11 U.S.C. § 522(d)(1)				
	Residence: 3 Br/3 Ba 2378Ft2 Rancher In Dallastown Pa Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2013 Hyundai Veloster 95000 miles Vehicle:	\$6,500.00		\$2,394.74	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Household furniture; pots/pants/dishes; living room suite;	\$7,500.00		\$7,500.00	11 U.S.C. § 522(d)(3)				
	dining room, kitchen furniture, bedroom suite, master bedroom, rugs, lights, china, silverware, small appliances; large appliances			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Line from Schedule A/B: 6.1

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
onedule 2/2 that hats this property	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Circotech media server 800 Projector 200 Main workstation PC .00 Virtual reality equipment .00 Dell 4210 rack .0 HP switch .0 HP switch .0 HP 1U Console .0 P KVM switch .00 5" TV .00 .2" TV .00 .2" TV .00 .253 60GB	\$6,740.00		\$5,900.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)	
60 Procurve DL3 Line from Schedule A/B: 7.1 Clothes:	\$1,500.00	_	\$1,325.00	11 U.S.C. § 522(d)(5)	
ine from Schedule A/B: 11.1	φ1,300.00		100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cove No Yes	3 years after that for ca	ises fi			

Official Form 106C

Case 1:21-bk-02550-HWV

Debtor 1						
Debtor 2 Spouse #, filling First Name Middle Name Last	Fill	in this information to identify yo	ur case:			
Debtor 2 Spouse #, filling First Name Middle Name Last	Deb	otor 1 Kenneth F Nisc	chan JR			
United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA Case number 21-02550 (If known) 21-02550 Check if this is an amended filling Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). In Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Tyes. Fill in all of the information below. Part 1: List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim of contingent 2.1 Essa Bank & Trust Describe the property that secures the claim: 200 Palmer Street Stroudsburg, PA 13360-0160 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another			•		-	
Case number 21-02550 Check if this is an amended filing			Middle Name Last Name		-	
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditors have claims secured Claims 2. List all Secured Claims 2. List all Secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor's name. 2.1 Essa Bank & Trust Describe the property that secures the claim: 2013 Hyundai Veloster 95000 miles Vehicle: 34,105.26 \$6,500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$12/15 \$0.00	Unit	ed States Bankruptcy Court for the	e: MIDDLE DISTRICT OF PENNSYLVANIA		-	
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1:	Cas	e number 21-02550				
Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space sneeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim and the claims in alphabetical order according to the creditor's name. Yes. Fill in all of the information below. Part 1: List All Secured Claims If a creditor has a particular claim, list the other creditor's name. Column A Amount of claim Do not educt the value of collateral, that supports this claim in alphabetical order according to the creditor's name. Sq. 105.26 S6,500.00 S0.00	(if kn	own)			☐ Check	if this is an
Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). I. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the order of list that as upports this claim. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately and secured that a supports this claim. 3. Anount of claim bo not deduct the value of collateral that supports this claim. 4. Anount of claim bo not deduct the value of collateral that supports this claim. 5. As of the date you file, the claim is: C					ameno	led filing
Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). I. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the order of list that as upports this claim. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately for each claim. 2. List all secured claims. If a creditor has a particular claim, list the creditor separately and secured that a supports this claim. 3. Anount of claim bo not deduct the value of collateral that supports this claim. 4. Anount of claim bo not deduct the value of collateral that supports this claim. 5. As of the date you file, the claim is: C	∩ff	icial Form 106D				
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No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List All Secure	is ne numl	eded, copy the Additional Page, fill it per (if known).	out, number the entries, and attach it to this form. On			
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2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Essa Bank & Trust Creditor's Name Describe the property that secures the claim: Creditor's Name Describe the property that secures the claim: 200 Palmer Street Stroudsburg, PA 18360-0160 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Column A Amount of claim Do not deduct the value of collateral, that supports this claim Do not deduct the value of collateral that supports this claim S4,105.26 S6,500.00 \$0.00 \$0.00 \$0.00		_	·	a nave nothing cise	to report on this form.	
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Creditor's Name Creditor's	for e	ach claim. If more than one creditor ha	s a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
200 Palmer Street Stroudsburg, PA 18360-0160 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another	2.1	Essa Bank & Trust	Describe the property that secures the claim:			
Stroudsburg, PA 18360-0160 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another As of the date you file, the claim is: Check all that apply. Contingent Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		Creditor's Name				
Number, Street, City, State & Zip Code Unliquidated Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		Stroudsburg, PA	apply.			
Who owes the debt? Check one. Nature of lien. Check all that apply. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Judgment lien from a lawsuit		Number, Street, City, State & Zip Code	_			
□ Debtor 1 only □ An agreement you made (such as mortgage or secured car loan) □ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) ■ At least one of the debtors and another □ Judgment lien from a lawsuit			☐ Disputed			
□ Debtor 2 only car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) ■ At least one of the debtors and another □ Judgment lien from a lawsuit	Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
□ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit	_	•	• • •	ired		
At least one of the debtors and another Judgment lien from a lawsuit	_	•	′			
	_	·				
	_		☐ Other (including a right to offset)			

community debt

Date debt was incurred 10/16/2015

Last 4 digits of account number

6553

Debtor 1 Kenneth E Nischan, JR	Case number (if known)	21-02550	21-02550				
First Name Middle N	lame Last Name						
2.2 Guaranteed Rate/dovenm	Describe the property that secures the claim:	\$195,885.00	\$251,900.00	\$0.00			
Creditor's Name	110 Dairyland Dr Dallastown, PA						
	17313						
	Residence: 3 Br/3 Ba 2378Ft2						
	Rancher In Dallastown Pa As of the date you file, the claim is: Check all that						
1 Corporate Drive	apply.						
Lake Zurich, IL 60047	☐ Contingent						
Number, Street, City, State & Zip Code	Unliquidated						
11 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured					
Debtor 2 only	car loan)						
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)						
At least one of the debtors and another	☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)						
Opened							
12/19 Last							
Date debt was incurred Active 09/21	Last 4 digits of account number 5399						
2.3 Mcnamara Auto Sales	Describe the property that secures the claim:	\$6,019.62	\$1,500.00	\$4,519.62			
Creditor's Name	2007 Dodge Grand Caravan 125000						
	l						
	miles						
	Vehicle:						
910 E Canal Road							
Dover, PA 17315	Vehicle: As of the date you file, the claim is: Check all that						
	Vehicle: As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated						
Dover, PA 17315 Number, Street, City, State & Zip Code	Vehicle: As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed						
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Vehicle: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.						
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	Vehicle: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or see	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Vehicle: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Vehicle: As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Vehicle: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Vehicle: As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Vehicle: As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Vehicle: As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	cured					
Dover, PA 17315 Number, Street, City, State & Zip Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 11/21/2020	Vehicle: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number	cured \$206,009	.88				

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in this	information to identify your	case:				
Debtor 1	Kenneth E Nischa	n. JR				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name			
	tes Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNS				
J J. G.	oo zamaapto, ooant oo ano.					
Case numb	per 21-02550					Nearly if this is an
(ii Kilowii)						Check if this is an amended filing
Schedu Be as comple Iny executor	ete and accurate as possible. Us ry contracts or unexpired leases	ho Have Unsecured Part 1 for creditors with PRIORIT that could result in a claim. Also li	Y claims and F	ontracts on Schedule A/	B: Property (Offici	ial Form 106A/B) and on
schedule D: eft. Attach thame and ca	Creditors Who Have Claims Secu	ired Leases (Official Form 106G). D ured by Property. If more space is i e. If you have no information to rep	needed, copy t	he Part you need, fill it o	ut, number the en	tries in the boxes on the
	creditors have priority unsecured					
_ `	Go to Part 2.					
☐ Yes.	00 10 1 411 2.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any	creditors have nonpriority unsec	ured claims against you?				
☐ No. \	You have nothing to report in this pa	art. Submit this form to the court with	your other sche	dules.		
Yes.						
unsecure	ed claim, list the creditor separately	aims in the alphabetical order of th of for each claim. For each claim listed st the other creditors in Part 3.If you h	, identify what ty	ype of claim it is. Do not lis	st claims already inc	cluded in Part 1. If more
						Total claim
	nex	Last 4 digits of acc	ount number	7243		\$2,265.00
P.o	npriority Creditor's Name D. Box 981537 Paso, TX 79998	When was the debt	incurred?	Opened 07/15 Las 8/22/21	st Active	_
Nur	mber Street City State Zip Code	As of the date you f	file, the claim is	s: Check all that apply		
	o incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	П от т	IIY unsecured	I claim:		
deb	Check if this claim is for a commot he claim subject to offset?	nunity — state and a	•	ration agreement or divorc	e that you did not	
				g plans, and other similar	debts	
	Ves	Other Specific				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 7

\$778.00							
\$1,040.00							
☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:							
\$3,081.00							
☐ Contingent							
☐ Unliquidated ☐ Disputed							
Type of NONPRIORITY unsecured claim: ☐ Student loans							

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 7

Elan Financial Service	Last 4 digits of account number	4991	\$3,625.00					
Nonpriority Creditor's Name		Opened 06/14 Last Active						
Cb Disputes Saint Louis, MO 63166	When was the debt incurred?	09/20						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i							
■ Debtor 1 only	☐ Contingent							
☐ Debtor 2 only	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	Student loans							
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
Yes	Other. Specify Credit Card	<u> </u>						
Jpmcb Card Nonpriority Creditor's Name	Last 4 digits of account number	5568	\$4,861.00					
Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	Opened 08/15 Last Active 10/20						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply						
Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	\square Debts to pension or profit-sharing plans, and other similar debts						
■ No	Debts to pension or profit-sharin							
☐ Yes	Other. Specify Credit Card							
Lvnv Funding Llc	Last 4 digits of account number	0032	\$2,950.00					
Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred?	Opened 04/21 Last Active 09/20						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply						
■ Debtor 1 only	☐ Contingent							
☐ Debtor 2 only	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
Check if this claim is for a community	Student loans							
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not						
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts						
	Factoring Company Account Citibank N.A.							
Yes	Other. Specify The Home	Depot						

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 7

Debto	Kenneth E Nischan, JR		Case number (if known) 21-02550				
4.8	Lvnv Funding Llc	Last 4 digits of account number	9600	\$1,570.00			
	Nonpriority Creditor's Name		Opened 06/21 Last Active				
	C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred?	08/20 <u>Cast Active</u>				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other Specify Factoring (Company Account Citibank N.A.				

4.9	Members 1st Fcu Nonpriority Creditor's Name	Last 4 digits of account number	0106	\$601.00			
	5000 Louise Dr Mechanicsburg, PA 17055	When was the debt incurred?	Opened 04/18 Last Active 8/27/21				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card					
4.1	Portfolio Recov Assoc		4540	\$0.005.00			
0	Nonpriority Creditor's Name	Last 4 digits of account number	1519	\$2,085.00			
	120 Corporate Blvd Ste 100	When was the debt incurred?	Opened 05/21 Last Active 09/20				
	Norfolk, VA 23502 Number Street City State Zip Code	As of the data you file, the claim	St. Chaola all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	ly Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:				
	☐ Check if this claim is for a community						
	debt	Disignations arising out of a separation agreement of divorce that you u					
	Is the claim subject to offset?	□ Debts to pension or profit-sharin					
	No	·					
	□Yes	Other. Specify Capital Bar	Company Account Comenity nk				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 7

Kenneth E Nischan, JR		Case number (if known) 21-02550	
Portfolio Recov Assoc	Last 4 digits of account number	3347	\$433
Nonpriority Creditor's Name	_		·
120 Corporate Blvd Ste 100 Norfolk, VA 23502	When was the debt incurred?	Opened 04/21 Last Active 10/20	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify N.A.	Company Account Capital One	
Synchrony Bank - Walmart	Last 4 digits of account number	3687	\$791
Nonpriority Creditor's Name Attn Bankruptcy PO Box 965060	When was the debt incurred?	Opened 09/15 Last Active 09/20	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Wells Fargo	Last 4 digits of account number	5456	\$1,444
Nonpriority Creditor's Name Credit Bureau Dispute Resoluti Des Moines, IA 50306	When was the debt incurred?	Opened 09/15 Last Active 7/19/20	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
le the claim cubiect to effect?	roport on priority alaims		
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	ng plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 7

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Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims Page 6 of 7
stcase.com Best Case Bankruptcy

Debtor 1 Kenneth E Nischan, JR

Case number (if known)

21-02550

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

Sample of the company of the c

j. Total Nonpriority. Add lines 6f through 6i. 6j. \$ 38,605.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 7

Fill in this infor	mation to identify your	case:		
Debtor 1	Kenneth E Nisch	an, JR		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number	21-02550			
(if known)				 Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
	-,				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	information to identify you	ur case:			
Debtor 1	Kenneth E Nisc				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the	: MIDDLE DISTRICT OF	PENNSYLVANIA		
Case numl	ber 21-02550				
(if known)					Check if this is an amended filing
044	. =			l	amenaea ming
	I Form 106H				
Sched	lule H: Your Co	debtors			12/15
1. Do :	e and case number (if know	,		as a codebtor.	
■ No □ Yes	S				
Arizon	hin the last 8 years, have yo a, California, Idaho, Louisiar Go to line 3.				y states and territories include
☐ Yes	s. Did your spouse, former sp	oouse, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	y if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
_	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I☐ Schedule G, lin	ine
_	Number Street			— Conedule O, IIII	<u> </u>
	City	State	ZIP Code		

Desc

Schedule H: Your Codebtors

Eill	in this information	to identify your of	200								
	otor 1	Kenneth E N									
	otor 2 use, if filing)		,			_					
Uni	ted States Bankrup	otcy Court for the	MIDDLE DISTRICT O	F PENNSYLVANIA							
Of Some suppose spoor	fficial Form chedule I: as complete and a plying correct info	Your Inconcernation If you parated and you	DME ible. If two married peo are married and not filin r spouse is not filing wit On the top of any addition	ig jointly, and your s th you, do not inclu	spouse i de inforr	s livii natio	An An As 13	or 2), bot you, incluyour spo	nt showing as of the fol	ation about e space is	12/15 sible for your needed,
	t 1: Describ	be Employment									
1.	information.	ioyment		Debtor 1				Debtor 2	or non-fili	ng spouse	
	If you have more attach a separate information abou employers.	e page with	Employment status Occupation	■ Employed□ Not employed				☐ Emplo			
	Include part-time self-employed wo		Employer's name	Full Circle Solut	tions						
	Occupation may or homemaker, if		Employer's address								
			How long employed th	nere?							
Esti i spou	mate monthly incuse unless you are	separated. spouse have mo	ate you file this form. If y	Ç		•			•	·	J
more	e space, attacii a s	eparate sneet to	uns tom.				For Debt	tor 1	For Debi	tor 2 or g spouse	
2.			ry, and commissions (becalculate what the monthly		2.	\$_	8,0	019.00	\$	N/A	-
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$_	8,01	9.00	\$	N/A	

					For	Debtor 1		ebtor 2 or iling spouse	
	Сору	line 4 here		4.	\$	8,019.00	\$	N/A	
5.	List a	all payroll deduc							-
	5a.	Tax, Medicare,	and Social Security deductions	5a.	\$	2,192.00	\$	N/A	
	5b.		tributions for retirement plans	5b.	\$	0.00	\$	N/A	-
	5c.	•	ributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.		ments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance		5e.	\$	437.50	\$	N/A	-
	5f.	Domestic supp	ort obligations	5f.	\$	0.00	\$	N/A	-
	5g.	Union dues	•	5g.	\$	0.00	\$	N/A	-
	5h.	Other deduction	ns. Specify:	5h.+	\$		+ \$	N/A	-
6.	Add	the payroll dedu	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,629.50	\$	N/A	-
7.	Calcu	ulate total month	nly take-home pay. Subtract line 6 from line 4.	7.	\$	5,389.50	\$	N/A	
8.	List a 8a.	Net income from profession, or for Attach a statement	ent for each property and business showing gross y and necessary business expenses, and the total	8a.	\$	0.00	 \$	N/A	_
	8b.	Interest and div	vidends	8b.	\$	0.00	\$	N/A	-
	8c.	regularly receive Include alimony,	payments that you, a non-filing spouse, or a dependent re spousal support, child support, maintenance, divorce property settlement.	: 8c.	\$	0.00	\$	N/A	
	8d.	Unemployment	compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security		8e.	\$	0.00	\$	N/A	-
	8f.	Include cash ass that you receive,	ent assistance that you regularly receive sistance and the value (if known) of any non-cash assistance, such as food stamps (benefits under the Supplemental ince Program) or housing subsidies.	e 8f.	\$	0.00	\$	N/A	_
	8g.	Pension or retir	rement income	8g.	\$	0.00	\$	N/A	_
	8h.	Other monthly i	income. Specify:	8h.+	\$	0.00	+ \$	N/A	_
9.	Add	all other income.	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	A
10	Calar	ulata manthir inc	name Addling 7 . ling 0	10. \$		5.389.50 + \$		N/A = \$	5,389.50
10.		•	come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		5,389.50 + \$_		N/A = \$	5,369.50
	State Include other Do no Speci	e all other regular de contributions fr friends or relative ot include any ame ify:	r contributions to the expenses that you list in Schedule from an unmarried partner, members of your household, your es. ounts already included in lines 2-10 or amounts that are not	dependavailab	le to pa	ay expenses list	ed in <i>Sci</i>	hedule J. 11. +\$	0.00
12.		that amount on the	e last column of line 10 to the amount in line 11. The res he Summary of Schedules and Statistical Summary of Certa					12. \$	5,389.50
13.	Do y	•	rease or decrease within the year after you file this form	1?				Combin monthly	ned y income
		No.							
		Yes. Explain:							

Official Form 106I Schedule I: Your Income page 2 Case 1:21-bk-02550-HWV Doc 23 Filed 01/19/22 Entered 01/19/22 16:03:00 Desc Page 24 of 58

Main Document

		(' (
	in this informa	tion to identify yo	our case:						
Debt	tor 1	Kenneth E N	lischan, 、	JR		Cł	neck if		
Dob	tor 2							amended filing	ving postpotition shorter
	tor 2 buse, if filing)								ving postpetition chapter the following date:
Unite	ed States Bankr	uptcy Court for the	: MIDDLI	E DISTRICT OF PENNSYL	LVANIA		MM	/DD/YYYY	
		1-02550							
(If kr	nown)								
Of	ficial Fo	rm 106J							
		J: Your	 Fyner	1686					12/15
Be a	as complete a ormation. If m nber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar					or supplying correct
1.	Is this a joir		, iioiu						
	■ No. Go to		in a separ	ate household?					
	□и	0		al Form 106J-2, <i>Expen</i> ses	for Separate Househ	old of D	ebtor 2	<u>.</u>	
2.	Do you have	e dependents?	■ No						
	Do not list D Debtor 2.	-	☐ Yes.	Fill out this information for each dependent	Dependent's relatio Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents								☐ Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
3.	expenses of	enses include f people other t d your depende	:han $_{f \Box}$	No Yes					
Esti exp app	imate your ex enses as of a licable date.	date after the	our bankr bankruptc	uptcy filing date unless y y is filed. If this is a supp	lemental <i>Schedule</i> .				
the		h assistance an		government assistance it cluded it on <i>Schedule I:</i> Y		1	_	Your expo	enses
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	4.	\$		990.21
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		496.77
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	\$		67.35
	4c. Home	maintenance, re	epair, and ι	upkeep expenses		4c.	\$		15.00
		owner's associat				4d.		· ·	0.00
5	Additional r	nortgage navm	onts for w	our residence such as ho	me equity loans	5	\$		0.00

Official Form 106J Schedule J: Your Expenses page 1

Debtor 1 _	Kenneth E Nischan, JR	Case number (if known	21-02550
6. Utilitie :	S:		
6a. E	Electricity, heat, natural gas	6a. \$	653.74
6b. \	Vater, sewer, garbage collection	6b. \$	81.88
6c. 7	elephone, cell phone, Internet, satellite, and cable services	6c. \$	194.50
6d. (Other. Specify:	6d. \$	0.00
. Food a	nd housekeeping supplies	7. \$	400.00
. Childo	are and children's education costs	8. \$	0.00
. Clothir	g, laundry, and dry cleaning	9. \$	100.00
	al care products and services	10. \$	100.00
	l and dental expenses	11. \$	80.00
	ortation. Include gas, maintenance, bus or train fare.	· 	
	include car payments.	12. \$	250.00
3. Enterta	inment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
4. Charita	ble contributions and religious donations	14. \$	0.00
5. Insura i	nce.		
Do not	include insurance deducted from your pay or included in lines 4 or 20.		
15a. L	ife insurance	15a. \$	0.00
15b. H	dealth insurance	15b. \$	0.00
15c. \	ehicle insurance	15c. \$	102.09
15d. (Other insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify	:	16. \$	0.00
	nent or lease payments:		
	Car payments for Vehicle 1	17a. \$	364.36
	Car payments for Vehicle 2	17b. \$	320.00
	Other. Specify: Freezer	17c. \$	85.00
	Other. Specify:	17d. \$	0.00
	ayments of alimony, maintenance, and support that you did not report as	40 ¢	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106l).	18. \$	
	payments you make to support others who do not live with you.	\$	0.00
Specify		19.	
	eal property expenses not included in lines 4 or 5 of this form or on Sche		
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	domeowner's association or condominium dues	20e. \$	0.00
1. Other:	Specify: Crystal Springs	21. +\$	7.42
2. Calcula	ate your monthly expenses		
	Id lines 4 through 21.	\$	4,408.32
	ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$.,-100.02
	Id line 22a and 22b. The result is your monthly expenses.	\$	4,408.32
220. AC	iu iine zza anu zzb. The result is your monthly expenses.	φ	4,408.32
3. Calcula	ate your monthly net income.		
23a. (Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,389.50
	Copy your monthly expenses from line 22c above.	23b\$	4,408.32
			· · · · · · · · · · · · · · · · · · ·
	Subtract your monthly expenses from your monthly income.		004.40
	he result is your monthly net income.	23c. \$	981.18
	expect an increase or decrease in your expenses within the year after your property of the year or do you expect your got lean within the year or do you expect your		persona or deorgous because of -
	nple, do you expect to finish paying for your car loan within the year or do you expect your tion to the terms of your mortgage?	mortgage payment to ii	ncrease or decrease because of a
■ No.	aon to the terms of your mongage:		
= IVO.			

Fill in this information to identify your case:	
Debtor 1 Kenneth E Nischan, JR	
First Name Middle Name Last Name	
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA	
Case number 21-02550 (if known)	☐ Check if this is an amended filing
If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false st obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
■ No	
	ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declarathat they are true and correct.	ation and
X /s/ Kenneth E Nischan, JR X	
Kenneth E Nischan, JR Signature of Debtor 2 Signature of Debtor 1	
Date January 19, 2022 Date	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

FI	l in this informa	ation to identify you	ır case:			
De	btor 1	Kenneth E Nisc	han, JR Middle Name	Last Name		
De	btor 2	Filst Name	midule marile	Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bank	cruptcy Court for the	MIDDLE DISTRICT OF P	ENNSYLVANIA		
1	nown) 21	-02550				Check if this is an amended filing
	fficial For		Affairs for Individ	luals Filing for	Bankruptcy	4/19
info	ormation. If mo		, attach a separate sheet to		re equally responsible for su iny additional pages, write yo	
Pa	rt 1: Give De	tails About Your M	arital Status and Where You	Lived Before		
1.	What is your	current marital stat	us?			
	☐ Married					
	■ Not marri	ed				
2.	During the las	st 3 years, have you	ı lived anywhere other than v	where you live now?		
	□ No					
		all of the places you	lived in the last 3 years. Do no	ot include where you live no	ow.	
	Debtor 1 Price	or Address:	Dates Debtor 1	Debtor 2 Prior A	Address:	Dates Debtor 2
	Debter 1111e	n Address.	lived there	Debter 2 Trior P		lived there
	635 Main St Felton, PA		From-To: 10/2016 - 10/2 0	☐ Same as Debto	or 1	☐ Same as Debtor 1 From-To:
	es and territorie. No Yes. Mak	s include Arizona, Ca	alifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto	unity property state or territo Rico, Texas, Washington and	
Pa	rt 2 Explain	the Sources of You	ur Income			
4.	Fill in the total If you are filing No	amount of income you a joint case and you	mployment or from operatin ou received from all jobs and a u have income that you receive	all businesses, including pa		endar years?
	Yes. Fill it	n the details.				
			Debtor 1	0	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar anuary 1 to Dec	year: ember 31, 2020)	■ Wages, commissions, bonuses, tips	\$104,382.00	bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Best Case Bankruptcy

Debtor 1		Debtor 2				
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)

List Certain Payments You Made Before You Filed for Bankruptcy

_	Ara aithar	Dobtor 1	'~ ~r D	abtar 2'a	dahta	nrimarily	consumer debts?
D.	Are enner	Debioi i	5 OI D	HULUI Z S	uenis	DITITIATION	consumer dedis?

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Guaranteed Rate 940 N Ravenswood Chicago, IL 60613	5/12/21, 6/4/21, 7/11/21	\$4,681.28	\$195.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Mcnamara Auto Sales 910 E Canal Road Dover, PA 17315	04/23/2021, 05/06/2021, 05/21/2021, 06/04/2021, 06/18/2021, 07/02/2021, 07/16/2021	\$1,120.00	\$6,019.62	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general particles of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Peacon for	this payment
	insider 5 Name and Address	Dates of payment	paid	still owe	ixeason ioi	tilis payment
R	Within 1 year before you filed for bankrupto	cy did you make any navr	ments or transfer a	ny property on a	ccount of a d	eht that henefited an
<i>J</i> .	insider? Include payments on debts guaranteed or cos		nems or transfer t	my property on a		oot that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment litor's name
			·			
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankruptulist all such matters, including personal injury modifications, and contract disputes.					
	Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	10 C350
	Case number	Nature of the case	Court or agency		Status of th	ie case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No		uding a bank or fir	nancial institution	, set off any a	amounts from your
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the bene	efit of creditors, a
	No					
	☐ Yes					
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gifts	with a total value	of more than \$60	0 per person	?
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600	Describe the gifts		Dates	s you gave	Value
	per person	Describe the gills		the g		value
	Person to Whom You Gave the Gift and Address:					

Case number (if known) 21-02550

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Kenneth E Nischan, JR

Deb	otor 1 Kenneth E Nischan, JR			Case number (i	f known) 21-02550	
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or each gift or each gift.			ns with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyth	ing because of thef	t, fire, other disaster,
	NoYes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	's				
	Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	preparir	ng a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Pugh & Cutaia PLLC 115 E. Philadelphia Street York, PA 17401 cutaialaw@gmail.com		Attorney Fees			\$1,000.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed to not include any payment or transfer that the No	ditors o	r to make payments to your creditor		transfer any prope	rty to anyone who
	Yes. Fill in the details.		Baradada and alama		D-1	A
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	ur busin 's made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details. Person Who Received Transfer		Description and value of	Describe a	ny property or	Date transfer was
	Address Person's relationship to you		property transferred		received or debts	made
	i Gradii a relationalip to you					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Ithin 10 years before you filed for bankrup eneficiary? (These are often called asset-pro		ny property to a	a self-setti	led trust or similar device	of which you are a
_	No Yes. Fill in the details.					
_	lame of trust	Description and	value of the pro	perty trar	nsferred	Date Transfer was made
art 8	List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and S	torage Un	nits	
so In	lithin 1 year before you filed for bankruptoold, moved, or transferred? clude checking, savings, money market, couses, pension funds, cooperatives, associ No Yes, Fill in the details.	or other financial accou	unts; certificates	s of depos	, ,	
N	Name of Financial Institution and Address (Number, Street, City, State and ZIP code)	Last 4 digits of account number	Type of acco instrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	o you now have, or did you have within 1 yash, or other valuables?	year before you filed fo	or bankruptcy, a	ıny safe d	eposit box or other depos	itory for securities,
=	•					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?
2. H	ave you stored property in a storage unit o		ır home within 1	l year befo	ore you filed for bankrupto	cy?
	No Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	e the contents	Do you still have it?
1	Better Rate Storage 10 Yoe Drive Yoe, PA 17313	Stefani Havers	stock	End Ta Old Vai Books/	or Shade Umbrella, An ble, A Jack From My n, Some 'Periodicals, Two Tires 'he Veloster	□ No ■ Yes
art 9	Identify Property You Hold or Control	for Someone Else				
	o you hold or control any property that so or someone.	meone else owns? Inc	lude any proper	rty you bo	orrowed from, are storing t	for, or hold in trust
	No Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City,		Describe	e the property	Value

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it o own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11: Give Details About Your Business or Con	nections to Any Business						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business								
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity,	either full-time or part-time					

7.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability con	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
☐ An owner of at least 5% of the voting or equity securities of a corporation									
■ No. None of the above applies. Go to Part 12.									
Yes. Check all that apply above and fill in the details below for each business.									
Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.						
		Name of accountant or bookkeeper	Dates business existed						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Kenneth E Nischan, JR

Case number (if known) 21-02550

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include institutions, creditors, or other parties.						
	■ No □ Yes. Fill in the details below.					
	Name Address (Number Street City State and ZIP Code)	Date Issued				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Kenneth E Nischan, JR	C:	ase number (if known)	21-02550
Part 12:	Sign Below			
are true a	nd the answers on this <i>Statement of Financial</i> and correct. I understand that making a false so nkruptcy case can result in fines up to \$250,0 §§ 152, 1341, 1519, and 3571.	tatement, concealing property, or	obtaining money or	, , , ,
/s/ Kenr	neth E Nischan, JR			
	n E Nischan, JR e of Debtor 1	Signature of Debtor 2		
Date J	anuary 19, 2022	Date		
Did you a ■ No □ Yes	ttach additional pages to Your Statement of F	Financial Affairs for Individuals Fili	ng for Bankruptcy (C	Official Form 107)?
Did you p	ay or agree to pay someone who is not an att	orney to help you fill out bankrupto	cy forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 8

Fill in this information to identify your case:							
Debtor 1	Kenneth E Nischan, JR						
Debtor 2 (Spouse, if filing)							
United States E	Bankruptcy Court for the: Middle District of Pennsylvania						
Case number (if known)	21-02550						

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
3. The commitment period is 3 years.						
4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	t 1:	Calculate Your Average Monthly Income							
1.	Wha	t is your marital and filing status? Check one of	only.						
	■ N	ot married. Fill out Column A, lines 2-11.							
	□м	arried. Fill out both Columns A and B, lines 2-11.							
1 th	01(10A ne 6 mo	e average monthly income that you received from all). For example, if you are filing on September 15, the 6-onths, add the income for all 6 months and divide the tota own the same rental property, put the income from that	month perio al by 6. Fill i	d would n the re	be March 1 thro sult. Do not inclu	ugh Au de any	gust 31. If the amoint m	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colui Debt		Column B Debtor 2 or non-filing spouse	
2.		gross wages, salary, tips, bonuses, overtime oll deductions).	, and com	nmissi	ons (before all	\$	8,333.34	\$	
3.		ony and maintenance payments. Do not include mn B is filled in.	e payment	ts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.					\$	0.00	\$	
5.		ncome from operating a business, ession, or farm	Debtor 1						
	Gros	s receipts (before all deductions)	\$	0.00					
	Ordir	nary and necessary operating expenses	-\$	0.00					
	Net r	nonthly income from a business, profession, or fa	ırm \$	0.00	Copy here ->	• \$	0.00	\$	
6.	Net i	ncome from rental and other real property	Debtor 1						
	Gros	s receipts (before all deductions)	\$	0.00					
	Ordir	nary and necessary operating expenses	-\$	0.00					
	Net r	nonthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

7. Interest, dividends, and royalties \$ 0.00 S Debtor 1 or non-filling spouse \$ 0.00 S S S S S S S S S S S S S S S S S	Debto	r 1	Kenneth E Nischan, JR		Case n	umber (if	known)	21-02550	1		
Interest, dividends, and royattes								Debtor 2 d		se	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 0.00 For your spouse \$ \$ 0.00 For your spouse For your your dependents, such as power of spouse For your are married and your spouse is filing with you. For your are married and your spouse is filing with you. For your are married and your spouse is filing with you. For your are married and your spouse is filing with you. For your are married and your spouse is filing with you. For your are married and your spouse is filing with you. For your are married and your spouse is filing with you. For you are married and your spouse is filing with you. For your are married and your spouse is filing with you. For you are married and your spouse is filing with you. For you are married and your spouse is filing with you. For you are married and your spouse is for filing with you. For you are married and your spouse is filing with you. For you are married and your spouse is for filing with you. For your spouse For your your dependent	7.	Inter	erest, dividends, and royalties		\$		0.00	\$			
the Social Security Act. Instead, list it here: For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, amounty, or allowance paid by the control of the social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, amounty, or allowance paid by the control of the social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, amounty, or allowance paid by the control of the social Security Act payments and the social security and the social security and the social security Act payments made under the Faderal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the corronavirua disease 2019 (COVID-19), payments received any exited a various or a separate page and put the total below. 10. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 13. Calculate the maritial adjustment. Check one: 14. You are not married. Fill in 0 below. 15. Ou are married and your spouse is filing with you. Fill in 0 below. 16. You are married and your spouse is not filing with you. Fill in 0 below. 17. Ou are married and your spouse is tot filing with you. Fill in 0 below. 18. Social and the spouse of the spou	8.	Une	employment compensation		\$		0.00	\$			
9. Pension or retirement income. Do not include any amount accided that was a benefit under the Scalal Security Act. Also, accept a stated in the nort asments, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of the 16th, entitled that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act, payments made under the Foderal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the corrowirus disease 2019 (COVID-19) payments received as a victim of a war crime, a crime against humanity, or international or domeste terroism. Or Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Calculate your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are not married. Fill in 0 below. 15. One of the social payment of the spouse's tax isability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax isability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 11. If this adjustment do		the S	Social Security Act. Instead, list it here:	t unde	r					_	
9. Pension or retirement income. Do not include any amount accided that was a benefit under the Scalal Security Act. Also, accept a stated in the nort asments, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of the 16th, entitled that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act, payments made under the Foderal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the corrowirus disease 2019 (COVID-19) payments received as a victim of a war crime, a crime against humanity, or international or domeste terroism. Or Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Calculate your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are not married. Fill in 0 below. 15. One of the social payment of the spouse's tax isability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax isability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 11. If this adjustment do		Fo	For you\$	00							
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Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the cornoavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Social Security of S	9.	bene not in Unite disab pay p does	nefit under the Social Security Act. Also, except as stated in the next senter include any compensation, pension, pay, annuity, or allowance paid by the ted States Government in connection with a disability, combat-related injurability, or death of a member of the uniformed services. If you received any paid under chapter 61 of title 10, then include that pay only to the extent these not exceed the amount of retired pay to which you would otherwise be en	nce, do e y or retired nat it	I	,	0.00	\$			
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Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your dependents. Such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 14. Your current monthly income. Subtract line 13 from line 12.					\$			\$			
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art 2: Determine How to Measure Your Deductions from Income Salasasasasasasasasasasasasasasasasasasa	11	Colo	eulate your total gyarage monthly income. Add lines 2 through 10 for						7 [
Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$	11.			\$	8,333.3	34 +	\$_		= \$		8,333.34
22. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$											
13. Calculate the marital adjustment. Check one:	Part	2:	Determine How to Measure Your Deductions from Income							mon	thly income
 You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$ \$ \$ \$ Total \$ \$ 0.00 Copy here⇒ • 0.00 Your current monthly income. Subtract line 13 from line 12. \$ 8,333.34 	12. 13.	Copy Calc	py your total average monthly income from line 11. culate the marital adjustment. Check one:						\$_		8,333.34
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adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$			Fill in the amount of the income listed in line 11, Column B, that was NOT dependents, such as payment of the spouse's tax liability or the spouse's	suppo	ort of som	neone o	ther th	an you or you	ır depe	endei	nts.
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. \$ 8,333.34 15. Calculate your current monthly income for the year. Follow these steps:			adjustments on a separate page.	ome de	evoted to	each p	urpose	. If necessary	, list a	dditio	onal
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps:			ii iiiis aujusiiiietii uoes tioi appiy, etitet 0 below.	\$							
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps:				\$							
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps:				+\$							
14. Your current monthly income. Subtract line 13 from line 12. \$ 8,333.34 15. Calculate your current monthly income for the year. Follow these steps:				r –			\neg				
15. Calculate your current monthly income for the year. Follow these steps:			Total	\$_		0.00	Co	py here=>	-		0.00
0.000.04	14.	Υοι	our current monthly income. Subtract line 13 from line 12.						\$_		8,333.34
15a. Copy line 14 here=>	15.										0 222 24
		15a	Sa. Copy line 14 here=>						\$_		0,333.34

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 2

Debtor 1	Kenneth E Nischan, JR	Case number (if known)	21-02550	
	Multiply line 15a by 12 (the number of months in a year).			x 12
15	b. The result is your current monthly income for the year for this part of the form.		\$	100,000.08

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not dete 11 U.S.C.</i> § 1325(b)(3). Go to Part 3. Do NOT fill out <i>Calculation of Your Disposable Income</i> (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 1325(b)</i> (3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of	57,919.00 ermined under
16b. Fill in the number of people in your household. 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not dete 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of	<u>, </u>
16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. □ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not dete</i> 17b. ■ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under</i> 17b. ■ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under</i> 17c. □ 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of	<u>, </u>
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not dete 11 U.S.C.</i> § 1325(b)(3). Go to Part 3. Do NOT fill out <i>Calculation of Your Disposable Income</i> (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 1325(b)</i> (3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of	<u>, </u>
 17a. How do the lines compare? 17a. □ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not dete</i> 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. ■ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under</i> 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of 	ermined under
 17a. □ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not dete</i> 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. ■ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under</i> 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of 	ermined under
17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 1325(b)(3)</i> . Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of	
your current monthly income from line 14 above.	
Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)	
18. Copy your total average monthly income from line 11 . \$	8,333.34
19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.	
19a. If the marital adjustment does not apply, fill in 0 on line 19a.	0.00
19b. Subtract line 19a from line 18.	8,333.34
20. Calculate your current monthly income for the year. Follow these steps:	
	8,333.34
Multiply by 12 (the number of months in a year).	2
X 1	
20b. The result is your current monthly income for the year for this part of the form	80.000,00
20c. Copy the median family income for your state and size of household from line 16c\$\$	57,919.00
21. How do the lines compare?	
Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The period is 3 years</i> . Go to Part 4.	commitment
■ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check commitment period is 5 years. Go to Part 4.	k box 4, The
Part 4: Sign Below	
By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.	
χ /s/ Kenneth E Nischan, JR	
Kenneth E Nischan, JR Signature of Debtor 1	
Date January 19, 2022 MM / DD / YYYY	
W 1 1 1 1 7 1 1 10 7 W 1 7 10 7 10 7 10	
If you checked 17a, do NOT fill out or file Form 122C-2.	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period page 4

☐ Check if this is an amended filing

Chapter 13 Calculation of Your Disposable Income

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: **Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

723.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 1

Case number (if known) 21-02550

People	who are under 65 years of age					
7a.	. Out-of-pocket health care allowance per person	\$	68			
7b.	. Number of people who are under 65	X	1_			
7c.	Subtotal. Multiply line 7a by line 7b.	\$6	00.88	Copy here=>	\$6	8.00
People	who are 65 years of age or older					
7d.	. Out-of-pocket health care allowance per person	\$	142			
7e.	. Number of people who are 65 or older	Х	0			
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	\$	0.00
7g.	. Total. Add line 7c and line 7f		\$	68.00	Copy total	\$ 68.00
Local S	standards You must use the IRS Local Standards t	o answer the	questions in li	nes 8-15.		
	on information from the IRS, the U.S. Trustee Prop ptcy purposes into two parts:	gram has divi	ided the IRS	Local Standard	for housing f	ior
■ Hou	sing and utilities - Insurance and operating expen	ses				
■ Hou	sing and utilities - Mortgage or rent expenses					
	wer the questions in lines 8-9, use the U.S. Truste te instructions for this form. This chart may also b					link specified in the
8. Ho	the instructions for this form. This chart may also busing and utilities - Insurance and operating expetite dollar amount listed for your county for insurance	enses: Using	the number of			fill \$ 515.00
9. Ho	ousing and utilities - Mortgage or rent expenses:					
9a.	. Using the number of people you entered in line 5, 1 listed for your county for mortgage or rent expense		amount		\$1,039	9.00
9b.	. Total average monthly payment for all mortgages a	and other debt	s secured by	your home.		
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.					
	Name of the creditor	Averag	ge monthly			

	Name of the creditor	Avera paym	age monthly nent						
	Guaranteed Rate/dovenm	\$	1,554.33	-					
	9b. Total average monthly payment	\$	1,554.33	Copy here=>	-\$_	1,	554.33	Repeat this amount on line 33a.	
) .	Net mortgage or rent expense.			,			7		
	Subtract line 9b (total average monthly payment) from li or rent expense). If this number is less than \$0, enter \$0	,	mortgage	\$		0.00	Copy here=>	. \$0.00	

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$ 0.00

Explain why:

9c.

Official Form 122C-2

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

0.00

423.49

expense here

423.49

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

0.00

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 3

Case 1:21-bk-02550-HWV

	ner Necessary Expenses In addition to the expense deductions the following IRS categories.	isted above, you are allowed your monthly expenses	s for		
16.	Taxes: The total monthly amount that you will actually pay for fede self-employment taxes, social security taxes, and Medicare taxes. your pay for these taxes. However, if you expect to receive a tax re and subtract that number from the total monthly amount that is with Do not include real estate, sales, or use taxes.	You may include the monthly amount withheld from fund, you must divide the expected refund by 12	\$	1,993.00	
17.	Involuntary deductions: The total monthly payroll deductions that	t your job requires, such as retirement			
	contributions, union dues, and uniform costs.		¢.	0.00	
	Do not include amounts that are not required by your job, such as	\$	0.00		
18.	Life Insurance: The total monthly premiums that you pay for your filing together, include payments that you make for your spouse's t Do not include premiums for life insurance on your dependents, for of life insurance other than term.	\$	0.00		
19.	Court-ordered payments: The total monthly amount that you pay administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support payments.		\$	0.00	
20			* —		
20.	Education: The total monthly amount that you pay for education the as a condition for your job, or	iat is either required.			
	for your physically or mentally challenged dependent child if no	nublic education is available for similar services	\$	0.00	
21	Childcare: The total monthly amount that you pay for childcare, su		· —		
	Do not include payments for any elementary or secondary school e	education.	\$	0.00	
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.				
23.					
	expenses, such as those reported on line 5 of Official Form 122C-	ell phone service. Do not include self-employment 1, or any amount you previously deducted.	+\$	0.00	
24.	expenses, such as those reported on line 5 of Official Form 122C- Add all of the expenses allowed under the IRS expense allowed	1, or any amount you previously deducted.	+ \$	4,728.81	
	expenses, such as those reported on line 5 of Official Form 122C- Add all of the expenses allowed under the IRS expense allowa Add lines 6 through 23. ditional Expense Deductions These are additional deductions	ances. Allowed by the Means Test.			
	Add all of the expenses allowed under the IRS expense allowate Add lines 6 through 23. ditional Expense Deductions These are additional deductions and Note: Do not include any expense.	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health	\$		
Add	Add all of the expenses allowed under the IRS expense allowate Add lines 6 through 23. ditional Expense Deductions These are additional deductions a Note: Do not include any expense insurance, disability insurance, and health savings accounts that a	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health	\$		
Add	Add all of the expenses allowed under the IRS expense allowate Add lines 6 through 23. ditional Expense Deductions These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions and the IRS expense allowate. These are additional deductions are allowed to the IRS expense allowate. These are additional deductions are allowate. The IRS expense allowate and the IRS expense allowate. The IRS expense allowate and the IRS expense allowate and the IRS expense allowate. The IRS expense allowate and	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, or	\$		
Add	Add all of the expenses allowed under the IRS expense allowate Add lines 6 through 23. ditional Expense Deductions These are additional deductions and Note: Do not include any expense insurance, disability insurance, and health savings accounts that a your dependents. Health insurance Health insurance Health insurance Health insurance Health insurance Health insurance	allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, of	\$		
Add	Add all of the expenses allowed under the IRS expense allowate Add lines 6 through 23. ditional Expense Deductions These are additional deductions and the IRS expense allowate Add lines 6 through 23. These are additional deductions and the IRS expense allowate Add lines 6 through 23. These are additional deductions and IRS expense allowate Add IRS expense Add IR	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, c 437.50 0.00	\$		
Add	Add all of the expenses allowed under the IRS expense allowal Add lines 6 through 23. ditional Expense Deductions These are additional deductions and Note: Do not include any expense insurance, disability insurance, and health savings accounts that a your dependents. Health insurance Disability insurance Health savings account Total	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, c 437.50 0.00 0.00	\$	4,728.81	
Add	Add all of the expenses allowed under the IRS expense allowal Add lines 6 through 23. ditional Expense Deductions These are additional deductions and Note: Do not include any expense insurance, disability insurance, and health savings accounts that a your dependents. Health insurance Disability insurance Total Do you actually spend this total amount?	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, c 437.50 0.00 0.00	\$	4,728.81	
Add	Add all of the expenses allowed under the IRS expense allowal Add lines 6 through 23. ditional Expense Deductions These are additional deductions and Note: Do not include any expense insurance, disability insurance, and health savings accounts that a your dependents. Health insurance Disability insurance Health savings account Total	ances. allowed by the Means Test. e allowances listed in lines 6-24. ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, c 437.50 0.00 0.00	\$	4,728.81	
Add 25.	Add all of the expenses allowed under the IRS expense allowal Add lines 6 through 23. ditional Expense Deductions These are additional deductions and the IRS expense allowal Note: Do not include any expense in surance, disability insurance, and health savings accounts that a your dependents. Health insurance Disability insurance Disability insurance Plealth savings account Total Do you actually spend this total amount? No. How much do you actually spend? Yes Continued contributions to the care of household or family me continue to pay for the reasonable and necessary care and support your household or member of your immediate family who is unable	allowed by the Means Test. e allowances listed in lines 6-24. count expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, or 0.00 437.50 Copy total here=> cembers. The actual monthly expenses that you will to fan elderly, chronically ill, or disabled member of to pay for such expenses. These expenses may	\$s	4,728.81	
25. 26.	Add all of the expenses allowed under the IRS expense allowal Add lines 6 through 23. ditional Expense Deductions These are additional deductions and Note: Do not include any expense allower. These are additional deductions and Note: Do not include any expense allower. These are additional deductions and Note: Do not include any expense and the Its area and Its area	allowed by the Means Test. e allowances listed in lines 6-24. count expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, of the second of the s	\$	4,728.81	
25. 26.	Add all of the expenses allowed under the IRS expense allowal Add lines 6 through 23. ditional Expense Deductions These are additional deductions and the IRS expense allowal Note: Do not include any expense in surance, disability insurance, and health savings accounts that a your dependents. Health insurance Disability insurance Disability insurance Plealth savings account Total Do you actually spend this total amount? No. How much do you actually spend? Yes Continued contributions to the care of household or family me continue to pay for the reasonable and necessary care and support your household or member of your immediate family who is unable	allowed by the Means Test. e allowances listed in lines 6-24. count expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, counters. 437.50 0.00 0.00 437.50 Copy total here=> combers. The actual monthly expenses that you will an elderly, chronically ill, or disabled member of to pay for such expenses. These expenses may 6 U.S.C. § 529A(b) conthly expenses that you incur to maintain the mand Services Act or other federal laws that apply.	\$s	4,728.81	

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 4

Desc

Case 1:21-bk-02550-HWV

Debtor 1	Kenneth E Nischan, JR	Case	e number (<i>if kno</i>	wn)	21-02	2550			
	Additional home energy costs. Your homeline 8.	e energy costs are included in your insurance	and operati	ng exp	ense	s on			
	If you believe that you have home energy of 8, then fill in the excess amount of home en	osts that are more than the home energy cost ergy costs	s included in	expe	nses (on line			
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must s ry.	show that the	additi	onal		\$	S	0.00
		ren who are younger than 18. The monthly pendent children who are younger than 18 ye							
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must e ot already accounted for in lines 6-23.	explain why t	he am	ount				
	* Subject to adjustment on 4/01/22, and eve	ry 3 years after that for cases begun on or aft	ter the date of	of adju	stmer	nt.	\$	S	0.00
		ne monthly amount by which your actual food allowances in the IRS National Standards. The in the IRS National Standards.							
		onal allowance, go online using the link speci o be available at the bankruptcy clerk's office		eparate	Э				
	You must show that the additional amount of	slaimed is reasonable and necessary.					\$	S	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organization	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	the form of	cash o	r finaı	ncial			
	Do not include any amount more than 15%	of your gross monthly income.					\$	S	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$		437.50
Ded	uctions for Debt Payment								
33. F	For debts that are secured by an interest i	n property that you own, including home r	nortgages,	vehicl	е				
	oans, and other secured debt, fill in lines	•							
	o calculate the total average monthly payme reditor in the 60 months after you file for bar	ent, add all amounts that are contractually duentry then divide by 60.	e to each se	cured					
	Mortgages on your home	γ,						erage i	monthly
33a.	Copy line 9b here					=>	\$_	1	,554.33
	Loans on your first two vehicles								
33b.	Copy line 13b here					=>	\$_		74.68
33c.						=>	\$_		109.51
33d.	List other secured debts:								
Nam	e of each creditor for other secured debt	Identify property that secures the debt	i	Does p nclude or insu	e taxe	S			
				□ N	0				
	-NONE-			□ Y	es	:	\$		
					ı		_		
				_	0				
				□ Y	es	;	\$ _		
				□ N	0				
				□ Y	es	+ ;	\$		
							Г		
33e	Total average monthly payment. Add lines	33a through 33d	\$1	738.5	52	Copy total here=>		₿	1,738.52

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 5

11011	noth = moonan, on							
	debts that you listed in lin property necessary for yo							
■ No.	Go to line 35.							
	State any amount that you	essession of your property (
Name of the	creditor	Identify property that secu	ires the debt	To	otal cure amount		onthly o	cure
-NONE-				\$	-	÷ 60 = \$		
				Total \$	0.00	Copy total here=>	\$	0.00
	owe any priority claims - s due as of the filing date o							
■ No.	Go to line 36.							
☐ Yes.	Fill in the total amount of a ongoing priority claims, such	Il of these priority claims. Do		current or				
	Total amount of all past-	lue priority claims		\$	0.00	÷ 60	\$	0.00
36. Projecte	ed monthly Chapter 13 plar	n payment		\$				
Office of the Exec To find a	multiplier for your district as a the United States Courts (for cutive Office for United State: list of district multipliers that inclu- instructions for this form. This lis	or districts in Alabama and N s Trustees (for all other dist udes your district, go online usin	North Carolinaticts). Ing the link spec	a) or by X cified in the				
Average	monthly administrative expe	ense			\$	Copy tota here=>		
	I of the deductions for deb es 33e through 36.	t payment.					\$	1,738.52
Total Deduc	ctions from Income							
38. Add all	of the allowed deductions.							
	ne 24, All of the expenses al	lowed under IRS	\$	4,728.81				
Copy lii	ne 32, All of the additional ex	xpense deductions	\$	437.50				
Copy li	ne 37, All of the deductions t	for debt payment	+\$	1,738.52				
Total de	eductions		\$	6,904.83	Copy total here=>	. :	S	6,904.83

Case 1:21-bk-02550-HWV

art 2: De	etermine You	ır Disposable Income Under 11 L	I.S.C. § 132	i(b)(2)					
		rent monthly income from line 14 Current Monthly Income and Calo				•		\$	8,333.34
childre disabilit received	n. The month y payments fo d in accordan	ly necessary income you receive ly average of any child support pay or a dependent child, reported in Pa ce with applicable nonbankruptcy lended for such child.	ments, foste art I of Form	r care paym 122C-1, tha	ents, or t you	\$	O	0.00	
employe in 11 U.	er withheld fro S.C. § 541(b)	etirement deductions. The month om wages as contributions for quali (7) plus all required repayments of . § 362(b)(19).	fied retireme	nt plans, as	specified	d \$	0	0.00	
42. Total of	f all deductio	ns allowed under 11 U.S.C. § 70	7(b)(2)(A). C	opy line 38 l	nere =	> \$	6,904	.83	
expense their exp	es and you ha penses. You i	al circumstances. If special circulate no reasonable alternative, described give your case trustee a detail ocumentation for the expenses.	ribe the spe	cial circums	ances ar	nd			
Describe th	ne special cir	rcumstances		Amour	nt of exp	ense			
				\$					
				\$					
				\$					
			Γ						
			Total	S	0.00	her	e=> \$ 	0.00	
44 Total a	diustments	Add lines 40 through 43.			=>	<u> </u>	6,904.83	Copy	6,904.83
+4. I Otal at	ujustinents. /	add iirles 40 triiough 43.			/	Ψ			0,304.03
45. Calcula	ate your mon	thly disposable income under §	1325(b)(2). S	Subtract line	44 from	line 39	Э.	\$	1,428.51
rt 3: CI	hange in Inco	ome or Expenses							
have ch time you you filed	anged or are ur case will be d your petition	or expenses. If the income in Form virtually certain to change after the e open, fill in the information below, check 122C-1 in the first column, in when the increase occurred, and	date you file For example enter line 2	ed your banle, if the wag	kruptcy p es report d columr	etition ed inc n, expl	and during the reased after		
Form	Line	Reason for change		Date	of change	9	Increase or decrease?	Amount of cl	nange
☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase	\$ \$	
☐ 122C-1 ☐ 122C-2 ☐ 122C-1							Decrease Increase	\$	

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 7

Debtor 1	Kenneth E Nischan, JR	Case number (if known) 21-02550	
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Part 4:	Sign	Below
ı aıt ı .	Sign	DEIOM

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Kenneth E Nischan, JR

Kenneth E Nischan, JR Signature of Debtor 1

Date January 19, 2022 MM / DD / YYYY

Official Form 122C-2

Debtor 1

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2021 to 10/31/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Full Circle Solutions

Year-to-Date Income:

Starting Year-to-Date Income: **\$30,192.32** from check dated **4/30/2021**. Ending Year-to-Date Income: **\$80,192.34** from check dated **10/31/2021**.

Income for six-month period (Ending-Starting): \$50,000.02.

Average Monthly Income: \$8,333.34 .

Case 1:21-bk-02550-HWV

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cha	pter 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Pennsylvania

In re	Kenneth E Nischan, JR		Case No.	21-02550	
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DI	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptc	y, or agreed to be paid	to me, for services rendered	or to
	For legal services, I have agreed to accept		\$	4,500.00	
	Prior to the filing of this statement I have received			1,000.00	
	Balance Due			3,500.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed com	pensation with any other perso	on unless they are mem	bers and associates of my lav	v firm.
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				. A
5.	n return for the above-disclosed fee, I have agreed to	render legal service for all aspe	ects of the bankruptcy	ease, including:	
t c	 Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the second second	atement of affairs and plan whiters and confirmation hearing, reduce to market value; e. ons as needed; preparation	ch may be required; and any adjourned hea xemption planning on and filing of mot	rings thereof; preparation and filing orons pursuant to 11 USC	f
б. I	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any disany other adversary proceeding.			es, relief from stay action	ns or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for	or payment to me for r	epresentation of the debtor(s)	in
	ınuary 19, 2022	/s/ Dawn Marie			
Já					
	nte	Dawn Marie Cut			
	nte	Dawn Marie Cut Signature of Attori Pugh & Cutaia I	ney		
	nte	Signature of Attorn Pugh & Cutaia I 115 E. Philadelp	ney PLLC		
	nte	Signature of Attorn Pugh & Cutaia I 115 E. Philadelp York, PA 17401	ney PLLC		
	nte	Signature of Attorn Pugh & Cutaia I 115 E. Philadelp	ney PLLC ohia Street		

United States Bankruptcy Court Middle District of Pennsylvania

In re	Kenneth E Nischan, JR		Case No.	21-02550	
		Debtor(s)	Chapter	13	
		` ,	•	-	
	VERIFICATI	ON OF CREDITOR	R MATRIX		
	,				
The abo	ove-named Debtor hereby verifies that the attack	ned list of creditors is true and	d correct to the best	of his/her knowledge	.

/s/ Kenneth E Nischan, JR

Kenneth E Nischan, JR Signature of Debtor

Date: January 19, 2022

United States Bankruptcy Court Middle District of Pennsylvania

In re	Kenneth E Nischan, JR		Case No.	21-02550
		Debtor(s)	Chapter	13

PAYMENT ADVICES COVER SHEET UNDER 11 U.S.C. § 521(a)(1)(B)(iv)

	UNDER	11 0.5.0	5. 9 52 1(a)(1)(b)(1V)
I, <u>Ke</u>	nneth E Nischan, JR , declare under penalty (BOXES):	of perjury tha	at the foregoing is true and correct (CHECK ONE OF THESE
	I have not been employed by any employer	within the 60	days before the date of the filing of the petition.
	I was employed by an employer within 60 depayment advices or other evidence of payment	•	ne date I filed my bankruptcy petition, but I have not received
	I have received payment advices or other ev from any employer, and they are attached.	idence of pa	yment within 60 days before the date I filed my bankruptcy petition
Date	January 19, 2022	Signature	/s/ Kenneth E Nischan, JR
			Kenneth E Nischan, JR Debtor

Number Page 1 of 1

Earnings Statement

Period Starting: Period Ending: Pay Date:

08/30/2021 09/12/2021 09/24/2021

Taxable Filing Status: Single Exemptions/Allowances:

Federal: Std W/H Table

Local:

0 Social Security Number: XXX-XX-XXXX

Tax Override:

Federal: 20.00 Addnl

State: Local:

KENNETH E NISCHAN 110 Dairyland Drive Dallastown, PA 17313

Earnings	rate	hours/units	this period	year to date
Regular Bonus		0.00	3461.54 0.00	65769.26 7500.00
	Gross Pay		\$3,461.54	\$73,269.26
	The Man of the Man	all Guade 30		

\$3,461.54	\$73,269.26
this period	year to date
-511.83	11504.16
-214.61	4542.69
-50.19	1062.40
0.00	0.00
-106.27	2249.38
-34.62	732.78
this period	year to date
-205.00	3545.00
-20.00	380.00
\$2,319.02	
	this period -511.83 -214.61 -50.19 0.00 -106.27 -34.62 this period -205.00 -20.00

Deposits	The Stant of Standard Standard	ik in j Juli
account number	transit/ABA	amount
XXXXXX1161	XXXXXXXX	2319.02
Important Notes		
Basis of pay: Salaried		

Your federal taxable wages this period are \$3,461.54

erify document authenticity - colored area must change in tone gradually and evenly from dark at top to lighter at bottom (

Full Circle Solutions Inc PO Box 2393 Baltimore, MD 21203

Pay Date:

09/24/2021

Deposited to the account

Checking DirectDeposit

account number XXXXXX1161

transit/ABA XXXXXXXX

amount 2319.02 © 1998, 2006. ADP, INC All Rights Reserved.

TEAR HERE

KENNETH E NISCHAN 110 Dairyland Drive Dallastown, PA 17313

Case 1:21-bk-02550-HWV Doc 23 Filed 01/19/22 Entered 01/19/22 16:03:00 Desc

SEQ 001066 Company Code RJ / WFJ 21653353 Loc/Dept Full Circle Solutions Inc PO Box 2393 Baltimore, MD 21203

Number Page 7646794 1 of 1

Earnings Statement

Period Starting: Period Ending: Pay Date:

09/13/2021 09/26/2021 10/08/2021

Taxable Filing Status: Single Exemptions/Allowances:

Federal: State:

Std W/H Table

Tax Override:

Federal: State:

20.00 Addnl

Local:

0 Local: Social Security Number: XXX-XX-XXXX **KENNETH E NISCHAN** 110 Dairyland Drive Dallastown, PA 17313

Earnings	rate	hours/units	this period	year to date
Regular Bonus		0.00	3461.54 0.00	69230.80 7500.00
	Gross Pay		\$3,461.54	\$76,730.80
	Statutory Dedu	ctions	this period	year to date
	Foderal Income	BELLEVICON PRESIDENCE PROPERTY	511 92	12015 00

Statutory Deductions	this period	year to date
Federal Income	-511.83	12015.99
Social Security	-214.62	4757.31
Medicare	-50.20	1112.60
Maryland State Income	0.00	0.00
Pennsylvania State Income	-106.27	2355.65
Yoe B Local Income	-34.62	767.40
Voluntary Deductions	this period	year to date
HEALTH	-205.00	3750.00
Dental	-20.00	400.00
Net Pay	\$2,319.00	

	a sund you sand his he	
Deposits	Township Township Sande	Sant -
account number	transit/ABA	amount
XXXXXX1161	XXXXXXXX	2319.00

Important Notes

Basis of pay: Salaried

Your federal taxable wages this period are \$3,461.54

Full Circle Solutions Inc PO Box 2393

Pay Date:

ERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

10/08/2021

Deposited to the account

Baltimore, MD 21203

Checking DirectDeposit

accoant number.
XXXXXXX1161

transit/ABA XXXXXXXX

amount 2319.00

KENNETH E NISCHAN 110 Dairyland Drive

Dallastown, PA 17313

Case 1:21-bk-02550-HWV Doc 23 Filed 01/19/22 Entered 01/19/22 16:03:00

THE ORIGINAL DOCUMENT HAS AN ARTIFICIAL WATEMAIN DOCUMENT Page 57 of 58 TO VIEW WHEN CHECKING THE ENDORSEMENT.

© 1998, 2006. ADP, INC All Rights Reserved TEAR HERE Number Page 7676649 1 of 1 **Earnings Statement**

Period Starting: Period Ending: Pay Date:

09/27/2021 10/22/2021



Taxable Filing Status: Single Exemptions/Allowances:

Federal: Std W/H Table State: Local:

Social Security Number: XXX-XX-XXXX

Tax Override: Federal:

20.00 Addnl

State: Local: KENNETH E NISCHAN 110 Dairyland Drive Dallastown, PA 17313

Earnings	rate hours/units	this period	year to date
Regular Bonus	0.00	3461.54 0.00	72692.34 7500.00
	Gross Pay	\$3,461.54	\$80,192.34
	Statutory Deductions	this period	year to date

Statutory Deductions	this period	year to date
Federal Income Social Security Medicare Maryland State Income Pennsylvania State Income Yoe B Local Income	-511.83 -214.62 -50.19 0.00 -106.27 -34.62	12527.82 4971.93 1162.79 0.00 2461.92 802.02
Voluntary Deductions	this period	year to date
HEALTH Dental	-205.00 -20.00	3955.00 420.00
Net Pay	\$2,319.01	

	The sum of	
Deposits account number	transit/ABA	amount
XXXXXX1161	XXXXXXXXX	2319.01

Important Notes Basis of pay: Salaried

Your federal taxable wages this period are \$3,461.54

Full Circle Solutions Inc PO Box 2393 Baltimore, MD 21203

Pay Date:

VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM (

10/22/2021

Deposited to the account

Checking DirectDeposit

account number

XXXXXXI161

transit/ABA XXXXXXXX

amount 2319.01 All Rights Reserved

ADP.

TEAR HERE

KENNETH E NISCHAN 110 Dairyland Drive Dallastown, PA 17313